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PTO/SB/01 (6-95)

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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b>  <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing    OR <input type="checkbox"/> Declaration Submitted after Initial Filing	<b>Attorney Docket Number</b>	<b>C 2586 COGG</b>
	<b>First Named Inventor</b>	<b>ANSMANN, Achim</b>
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	
	<b>Filing Date</b>	
	<b>Group Art Unit</b>	
	<b>Examiner Name</b>	

As a below named inventor, I hereby declare that:  
My residence, post office address, and citizenship are as stated below next to my name.  
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**EMOLLIENTS AND COSMETIC PREPARATIONS**  
(Title of the Invention)

the specification of which  
☒ is attached hereto  
OR  
☐ was filed on (MM/DD/YYYY)  as United States Application Number or PCT International Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
102 54 315.1	DE	11/21/2002	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

**DECLARATION****Page 2**

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365 of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name  Customer Number  or label   
OR

☒ List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
John E. Drach	32,891		
Steven J. Trzaska	36,296		
Aaron R. Ettelman	42,516		

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number  or label **23657** OR ☒ Fill in correspondence address below

Name	John E. Drach				
Address					
Address					
City		State		Zip	
Country		Telephone	215-628-1414	Fax	215-628-1345

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**Name of Sole or First Inventor:** ☐ A petition has been filed for this unsigned inventor

Given Name	Achim	Middle Initial		Family Name	Ansmann	Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City	Erkrath	State		Country	Germany	Citizenship	Germany
Post Office Address	Kirchberg 25						
Post Office Address							
City	40699 Erkrath	State		Zip		Country	Germany
						Applicant Authority	

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

Type a plus sign (+) inside this box → ☐

C 2586 COGG

										ADDITIONAL INVENTOR(S) Supplemental Sheet			
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	Sabin			Middle Initial		Family Name	B th			Suffix e.g. Jr.			
Inventor's Signature								Date					
Residence: City	Duesseldorf			State		Country	Germany			Citizenship	Germany		
Post Office Address	Neustaedterweg 23												
Post Office Address													
City	40229 Duesseldorf			State		Zip		Country	Germany		Applicant Authority		
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	Daniela			Middle Initial		Family Name	Prinz			Suffix e.g. Jr.			
Inventor's Signature								Date					
Residence: City	Dormagen			State		Country	Germany			Citizenship	Germany		
Post Office Address	Kiefernstrasse 7												
Post Office Address													
City	41542 Dormagen			State		Zip		Country	Germany		Applicant Authority		
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	Nicole			Middle Initial		Family Name	Schoeffler			Suffix e.g. Jr.			
Inventor's Signature								Date					
Residence: City	Monheim			State		Country	Germany			Citizenship	Germany		
Post Office Address	Holzweg 101												
Post Office Address													
City	40789 Monheim			State		Zip		Country	Germany		Applicant Authority		
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	Alfred			Middle Initial		Family Name	Westfechtel			Suffix e.g. Jr.			
Inventor's Signature								Date					
Residence: City	Hilden			State		Country	Germany			Citizenship	Germany		
Post Office Address	Menzelweg 74												
Post Office Address													
City	40724 Hilden			State		Zip		Country	Germany		Applicant Authority		
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto													